

TETANUS BOOSTER DEFERRAL

DON'T VACCINATE UNTIL 2002*

ROUTINE ADULT BOOSTER

ROUTINE ADOLESCENT BOOSTER

VACCINATE AS USUAL**

WOUND MANAGEMENT

FOREIGN TRAVEL

INCOMPLETE PRIMARY SERIES

PREGNANCY

*Per CDC interim recommendation

**See back or second page for more information

A nationwide shortage of tetanus and diphtheria toxoids (Td) in the United States has resulted since one of two manufacturers discontinued production of tetanus toxoid-containing products in January 2001. Aventis Pasteur (Swiftwater, Pennsylvania) is the sole remaining major nationwide manufacturer of tetanus and diphtheria toxoids (Td).

In response to the shortage, Aventis Pasteur has increased production of Td to meet national needs.

The production time is 11 months and the shortage is expected to last for the remainder of 2001.

PRIORITIZATION OF AVAILABLE Td WILL BE NECESSARY UNTIL THE SUPPLIES ARE RESTORED.

Aventis Pasteur is shipping Td only to public health clinics and urgent care facilities (such as emergency rooms and burn units) so that adequate supplies are available for priority needs as defined by the US Centers for Disease Control and Prevention (CDC) interim guidelines. Notification will immediately follow once the Td supply becomes available for wider or routine use. Aventis Pasteur has asked for the cooperation of health care providers during the interim period to ensure that all critical care needs can be met. Institutions requiring Td for priority indications should contact Aventis Pasteur at 1-800-822-2463 (1-800-VACCINE).

SOURCES:

US Centers for Disease Control and Prevention (CDC). Deferral of Routine Booster Doses of Tetanus and Diphtheria Toxoids for Adolescents and Adults. MMWR 2001;50:418,427

Aventis Pasteur

****More Information About Priority Td Vaccination**

WOUND MANAGEMENT: Health professionals using Td for wound management and in disaster situations should follow recommendations from the CDC's Advisory Committee on Immunization Practices for wound management. Td is preferred to TT because Td provides protection against both tetanus and diphtheria. However, during this shortage, if Td is not available, TT can be used as an alternative for persons 7 years of age or older who require immediate boosting with TT (e.g., wound management).

The following recommendations should be observed when administering Td vaccination:

- For persons with severe or contaminated wounds, Td should only be given if more than 5 years have passed since the last dose of tetanus-containing vaccine.
- For clean and minor wounds, Td should be given only if the patient has not received a tetanus-containing vaccine within the past 10 years.
- Healthcare providers should inquire from patients presenting for wound management about the timing of their last tetanus-containing vaccine to avoid unnecessary vaccination.
- Pediatric formulations of diphtheria and tetanus toxoids and acellular pertussis vaccine (DTaP) should not be used in persons 7 years of age or older.

FOREIGN TRAVEL: Td should be administered to persons traveling to countries where the risk for diphtheria is high. Travelers to certain countries may be at substantial risk for exposure to toxigenic strains of *C. diphtheriae*, especially with prolonged travel, extensive contact with children, or exposure to poor hygiene. High-risk countries include the following: **Africa**—Algeria, Egypt, and sub-Saharan Africa; **Americas**—Brazil, Dominican Republic, Ecuador, and Haiti; **Asia/Oceania**—Afghanistan, Bangladesh, Cambodia, China, India, Indonesia, Iran, Iraq, Laos, Mongolia, Myanmar, Nepal, Pakistan, Philippines, Syria, Thailand, Turkey, Vietnam, and Yemen; and **Europe**—Albania and all countries of the former Soviet Union.^{1,2,3}

INCOMPLETE PRIMARY SERIES: Td should be administered to persons who have received less than 3 doses of vaccine containing tetanus and diphtheria toxoids (i.e., the primary series).

Routine Td boosters in adolescents and adults should be delayed until 2002.^{2,3}

PREGNANCY: Td should be administered to pregnant women who have not been vaccinated with Td within the preceding 10 years.²

1 Immunization Practices Advisory Committee. Diphtheria, tetanus, and pertussis: recommendations for vaccine use and other preventive measures—recommendations of the Immunization Practices Advisory Committee. MMWR 1991;40 (no. RR-10)

2 CDC. Shortage of tetanus and diphtheria toxoids. MMWR 2000;49:1029-30

3 CDC. Deferral of Routine Booster Doses of Tetanus and Diphtheria Toxoids for Adolescents and Adults. MMWR 2001;50:418,427